

COMBINED DECLARATION AND POWER OF ATTORNEY

Anorney Docket No

WILK-145

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of subject matter which is claimed and for which a patent is sought on the invention entitled AEROBIC RESISTANCE GARMENT WITH PERIMETER WEIGHTED ATHLETIC SHOES

the specification of which

(check one) ☒ is attached hereto

☐ was filed on _____ as ☐ Application Serial No. _____

☐ Express Mail No. _____, as Serial No. not yet known.
and including all the amendments through the date hereof.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

_____	_____	_____	Yes	No	<input type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)				
_____	_____	_____	Yes	No	<input type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country)	(Day/Month/Year Filed)				

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112. I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application

— 60/416,014 — 10/3/02 — pending —
(Application Serial No.) (Filing Date) (Status)
(patented, pending, abandoned)

_____ (Application Serial No.) _____ (Filing Date) _____ (Status)
(patented, pending, abandoned)


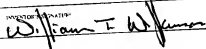
_____ (Application Serial No.) _____ (Filing Date) _____ (Status)
(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Rudolf E. Hutz, Reg. No. 22,397; Harold Pezzner, Reg. No. 22,112; John D. Fairchild, Reg. No. 19,756; Richard M. Beck, Reg. No. 22,580; Paul E. Crawford, Reg. No. 24,397; Thomas M. Meshbeshier, Reg. No. 25,083; Patricia Smink Rogowski, Reg. No. 33,791; Robert G. McMorrow, Jr., Reg. No. 30,962; Ashley I. Pezzner, Reg. No. 35,646; William E. McShane, Reg. No. 32,707; Mary W. Bourke, Reg. No. 30,982; Gerard M. O'Rourke, Reg. No. 39,794 all of P.O. Box 2207, Wilmington, Delaware 19899-2007, my attorneys with full power of substitution and revocation.

Send Correspondence To: Connolly Bove Lodge & Hutz LLP P.O. Box 2207 Wilmington, Delaware 19899-2207		Direct Telephone Calls To: (302) 658-9141	
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FULL NAME OF FIRST INVENTOR TIMOTHY P. DICKEH	INVENTOR'S SIGNATURE 	DATE
ADDRESS 6900N Foothill Boulevard, Tujunga, CA 91062-2781		CITIZENSHIP UNITED STATES OF AMERICA
POST OFFICE ADDRESS SAME AS ABOVE		
FULL NAME OF SECONDARY INVENTOR IF ANY WILLIAM T. WILKINSON	INVENTOR'S SIGNATURE 	DATE 9-28-03
RESIDENCE P. O. Box 73, Salem, NJ 08079		CITIZENSHIP UNITED STATES OF AMERICA
POST OFFICE ADDRESS Same as above		
FULL NAME OF THIRD JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF FOURTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF FIFTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF SIXTH JOINT INVENTOR IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		